§4.72

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THE SPINE—Continued

	Rat- ing
In other cases rate in accordance with definite limited motion or muscle spasm, adding 10 percent for demonstrable deformity of vertebral body.	
NOTE: Both under ankylosis and limited motion, ratings should not be assigned for more than one segment by reason of involvement of only the first or last vertebrae of an adjacent segment.	
5286 Spine, complete bony fixation (ankylosis) of: Unfavorable angle, with marked deformity and involvement of major joints (Marie-Strumpell type) or without other joint involvement	
(Bechterew type) Favorable angle 5287 Spine, ankylosis of, cervical:	100 60
Unfavorable	40 30
Unfavorable	30 20
Unfavorable	50 40
Severe	30 20 10
5291 Spine, limitation of motion of, dorsal: Severe	10 10 0
5292 Spine, limitation of motion of, lumbar: Severe	40 20
Moderate	10
Pronounced; with persistent symptoms compat- ible with sciatic neuropathy with characteristic pain and demonstrable muscle spasm, absent ankle jerk, or other neurological findings ap- propriate to site of diseased disc, little intermit- tent relief	60
Severe; recurring attacks, with intermittent relief Moderate; recurring attacks	40 20 10
Postoperative, cured	0
space, or some of the above with abnormal mobility on forced motion	40
standing position With characteristic pain on motion With slight subjective symptoms only	20 10 0

THE SKULL

		Rat- ing
5206	Skull loss of part of both inner and outer ta-	

THE SKULL—Continued

	Rat- ing
With brain hernia	80
Without brain hernia:	
Area larger than size of a 50-cent piece or	
1.140 in ² (7.355 cm ²)	50
Area intermediate	30
Area smaller than the size of a 25-cent piece or 0.716 in 2 (4.619 cm 2)	10
NOTE: Rate separately for intracranial complications.	

THE RIBS

	Rat- ing
5297 Ribs, removal of:	
More than six	50
Five or six	40
Three or four	30
Two	20
One or resection of two or more ribs without re-	
generation	10
NOTE (1): The rating for rib resection or removal is not to be applied with ratings for purrulent pleurisy, lobectomy, pneumonectomy or injuries of pleural cavity.	
NOTE (2): However, rib resection will be considered as rib removal in thoracoplasty performed for collapse therapy or to accomplish obliteration of space and will be combined with the rating for lung collapse, or with the rating for lobectomy, pneumonectomy or the graduated ratings for pulmonary tuberculosis.	

THE COCCYX

	Rat- ing
5298 Coccyx, removal of:	
Partial or complete, with painful residuals	10
Without painful residuals	0

[29 FR 6718, May 22, 1964, as amended at 34 FR 5062, Mar. 11, 1969; 40 FR 42536, Sept. 15, 1975; 41 FR 11294, Mar. 18, 1976; 43 FR 45350, Oct. 2, 1978; 51 FR 6411, Feb. 24, 1986; 61 FR 20439, May 7, 1996]

§4.72 [Reserved]

\$4.73 Schedule of ratings—muscle injuries.

NOTE: When evaluating any claim involving muscle injuries resulting in loss of use of any extremity or loss of use of both buttocks (diagnostic code 5317, Muscle Group XVII), refer to §3.350 of this chapter to determine whether the veteran may be entitled to special monthly compensation.